AMENDMENT TRANSMITTAL LETTER						Docket No. 0717-0513P	
Application No.		Filing Date		Examiner		Art Unit	
10/630,731-Conf. #9350		July 31, 2003		A. J. Wujciak		3632	
Applicant(s): Tak	enori YOSHIZA	AWA					
	AY SUBSTRAT VING THE DIS			AY AND APPARAT	US AND	METHOD FOR	
MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 22	313-1450	ndment in the	ahove identi	find application			
Transmitted herewith is an amendment in the above-identified application.  The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	12	- 20 =	0	x 50.00		0.00	
Independent Claims	5	- 5 =	0	x 210.00		0.00	
Multiple Dependent Claims (check if applicable)							
Other fee (please specify):							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						0.00	
x Large Entity	1			Small Entity			
x No additiona	al fee is require	d for this ame	ndment.				
Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed.							
A check in t	he amount of \$	<u> </u>	is enclo	sed.			
Payment by credit card. Form PTO-2038 is attached.							
The Director is hereby authorized to charge and credit Deposit Account No02-2448 as described below. A duplicate copy of this sheet is enclosed.							
x Credit any overpayment.							
Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
Rolet Doyne# 48222 Dated: June 24, 2008							
Charles Gorens Attorney Reg. N	stein						
BIRCH, STEW, 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8000	e Road (irginia 22040-0		LP				

Birch, Stewart, Kolasch & Birch, LLP CG/RWD/rc